

## Iowa Department of Public Health Women's Health-Related Programs Summary January 2012

The Iowa Department of Public Health (IDPH) Office of Women's Health has compiled an inventory of IDPH programs that address the unique health care needs of women. Twenty-four programs incorporate women's health services into their public health programming. The following summaries provide an overview of current programs.

### **ADDICTIVE BEHAVIORS**

#### **Gambling Treatment**

- The IDPH Office of Problem Gambling Treatment and Prevention funds outpatient counseling for gamblers, family members, and concerned persons affected by problem gambling behavior.
- Recovery Support Services (RSS) are available for eligible persons seeking services through an IDPH funded problem gambling services program. RSS are a broad array of client-selected community-based services intended to enhance and further the individual's recovery journey.
- Iowans can call **1-800-BETS OFF (1-800-238-7633)**, a 24-hour toll-free help line, to obtain problem gambling information, and connect with a gambling treatment provider in their area.
- *Services for women:* In fiscal year 2011, 52 percent of gamblers admitted to treatment were women, and 67 percent of admitted family and other concerned persons were women.
- In fiscal year 2011, 53 percent of the 5,969 calls to the toll-free help line were made by females.
- The Office of Problem Gambling Treatment and Prevention website is <http://www.1800betsoff.org>.

#### **Substance Abuse Prevention and Treatment**

- IDPH funds and monitors 48 substance abuse prevention contracts statewide, ranging from comprehensive prevention, through mentoring and youth development. In addition, 23 contracts have been issued specific to Strategic Prevention Framework/State Incentive Grants (SPF/SIG). Prevention best practices include programming for women and girls.
- IDPH is the licensing authority for substance abuse treatment services statewide.
- Women represented approximately 31 percent of admissions during SFY2011. Of these admissions, alcohol was the primary drug for 45 percent, marijuana/hashish was the primary drug for 26 percent, and methamphetamines were the primary drugs for 17 percent.
- Four (4) programs provide statewide specialized residential treatment programs that admit women and their dependent children. In addition, six (6) other programs admit women to standard residential treatment programs. Ten (10) programs provide specialized outpatient services for women.
- In addition to treatment, the specialized women's programs include ancillary services that contribute to recovery for women, such as women's health clinics, on-site daycare, parenting classes, children's health care, and gender-specific therapeutic approaches.
- Substance abuse resource information, including treatment programs, may be found at <http://www.drugfreeinfo.org> or by calling 1-866-242-4111.

#### **Tobacco**

- The IDPH tobacco prevention and control program focuses on four goals: (1) preventing the initiation of tobacco use by youth; (2) promoting cessation by adults and youth; (3) eliminating exposure to secondhand smoke; and, (4) maintaining a tobacco control community coalition. Each Community Partnership must include objectives and/or activities to reduce tobacco-related disparities in populations identified as disproportionately impacted by tobacco use.

- Quitline Iowa (**1-800-QUIT-NOW** or <http://www.quitlineiowa.org>) is a free tobacco cessation helpline that provides information, materials, and multiple sessions of proactive counseling. Trained counselors provide services seven days a week. Specialized counseling is available for pregnant women. Services are provided in a variety of languages. An optional text messaging program allows callers to receive free text messages with motivational messages to quit and reminders of upcoming sessions with Quitline Iowa.
- Quitline Iowa also provides counseling services for all Medicaid clients eligible for coverage of cessation pharmaceuticals (nicotine patch, nicotine gum, nicotine lozenge, bupropion, and Chantix™.) Clients must be fax-referred to Quitline Iowa by their Medicaid provider using the proper Medicaid Prior Authorization form and enroll in ongoing Quitline Iowa counseling in order to receive this benefit. Prior Authorization forms can be downloaded at [www.iowamedicaidpdl.com](http://www.iowamedicaidpdl.com).
- A “Communities Putting Prevention to Work” grant was awarded to IDPH and Linn and Ringgold counties. Both counties will pilot policy change initiatives to assist in creating conditions in which populations can be healthy across Iowa. One example is that Mount Ayr and Diagonal city councils in Ringgold County will proactively approve ordinances banning point-of-purchase indoor tobacco advertising within 1,000 feet of school campuses, child/daycare centers, and after school centers. Another example is that Linn County plans to adopt and implement in the Cedar Rapids metro area a land use and zoning policy creating and defining tobacco retailer exclusionary zones within 2,000 feet of schools, parks, playgrounds, and daycare centers. Funding for this grant will end in March 2012.
- Support for passing a statewide tobacco-free school campus law has been initiated through a grant from CDC. Activities will be centered on educating the public and policy makers about the negative impacts of tobacco use on student school performance. After passage, the initiative will provide education on the provisions of the law and its implementation and enforcement.

## **CHRONIC DISEASE/RISK REDUCTION**

### **Breast and Cervical Cancer Early Detection Program**

- Iowa’s *Care for Yourself* Breast and Cervical Cancer Early Detection Program (BCCEDP) provides free mammograms and Pap tests to eligible women. The federally funded program is designed to reduce mortality and morbidity from breast and cervical cancer.
- Breast cancer is by far the most common cancer among Iowa women. Mortality from breast cancer can be reduced substantially if a tumor is discovered at an early stage. Cervical cancer is the second most common cancer in women worldwide, and the twelfth most common cancer among women in Iowa. With early detection through Pap test screening and appropriate treatment, cervical cancer survival rates can be almost 100 percent.
- Women age 50 to 64 years, with incomes at or below 250 percent of the federal poverty guideline, who are under-insured or uninsured, are eligible to participate. Women living in rural areas or members of racial or cultural minorities are targeted. Iowa’s program also serves a limited number of women age 40 to 49, and some younger women with breast cancer symptoms.
- Women diagnosed with pre-cancerous or cancerous lesions and needing treatment are referred to other sources, including the Iowa Medicaid Optional Program. This program became available in 2001 through state legislation following passage of the federal Breast and Cervical Cancer Prevention and Treatment Act of 2000.
- In calendar year 2010, the Iowa BCCEDP provided services to 8,333 women. Services included 6,259 breast exams; 7,080 mammograms; and 3,951 Pap tests. The program referred several hundred ineligible women to other sources for screening.
- For more information, contact Iowa Healthy Families Line at **1-800-369-2229** or visit <http://www.idph.state.ia.us/careforyourself/default.asp>.

### **WISEWOMAN Program**

- About 2,200 BCCEDP participants annually receive heart disease and stroke risk screening and intervention services through the Iowa Care for Yourself program. These services are funded by WISEWOMAN (Well-Integrated Screening and Evaluation for Women Across the Nation) through the Centers for Disease Control and Prevention (CDC). Participants are screened for blood pressure, blood cholesterol, blood glucose, and height and weight. They also receive individualized nutrition and physical activity counseling and education.
- Iowa's WISEWOMAN project is one of 21 funded by CDC to reduce women's heart disease risk.
- For more information, contact the program manager, Lindsey Drew, at (515) 281-6779 or [Lindsey.Drew@idph.iowa.gov](mailto:Lindsey.Drew@idph.iowa.gov).

### **Iowa Comprehensive Cancer Control Program**

- The Iowa Comprehensive Cancer Control Program (ICCCP) brings together people and resources from across the state to reduce the burden of cancer in Iowa. The ICCCP is an active partner and funder of the Iowa Cancer Consortium (ICC), the statewide cancer partnership. Information on cancer risk, treatment, support services, clinical trials and many other educational resources and links is available at the ICC's website ([www.canceriowa.org](http://www.canceriowa.org)) or by calling **1-800-237-1225**.
- The ICCCP is the recipient of a CDC comprehensive cancer control grant and two educational cancer site-specific grants: skin and colorectal.
- Four Iowa-specific colorectal cancer screening social marketing campaigns have been developed for rural, African American, Latino and SE Asians populations and are available free of charge upon request.
- The "Iowa Get Screened Colorectal Cancer Program," a CDC grant, focuses on:
  - Providing limited colorectal cancer (CRC) screenings for populations between ages 50-64 who are uninsured, underinsured and under 250 percent of the federal poverty level.
  - Policy and system improvements.
  - Increasing CRC awareness and education to all Iowans and to increase the screening rate for the targeted 50-64 year old population from 64 to 80 percent.
  - More information is posted at: [www.idph.state.ia.us/IGS/](http://www.idph.state.ia.us/IGS/)
- The state cancer plan addresses cancer prevention and risks, early detection, treatment, survivorship/quality of life and includes cross-cutting issues related to collaboration, workforce, research, evaluation, policy/systems change and population disparities. The recently revised plan, 2012-2017 Iowa Cancer Plan, was released in October 2011. The Plan is available at [http://www.idph.state.ia.us/CCC/common/pdf/state\\_cancer\\_plan.pdf](http://www.idph.state.ia.us/CCC/common/pdf/state_cancer_plan.pdf)
- A companion report to the State Cancer Plan, identifying cancer-specific disparities and strategies to address them, is at [http://www.idph.state.ia.us/hpcdp/common/pdf/ia\\_cancer\\_health\\_disparities.pdf](http://www.idph.state.ia.us/hpcdp/common/pdf/ia_cancer_health_disparities.pdf)
- An updated cancer burden report, *The Changing Face of Cancer in Iowa*, highlights personal stories of cancer survivors, progress made to reduce the burden of cancer and identifies areas for improvement.
- An educational campaign/toolkit for primary care providers called *The Power of Talk*, is available to help providers begin the discussion about colorectal cancer screening with their patients.
- For more information about the ICCCP, please contact the program coordinator, at **515-281-0925**, or visit [www.idph.state.ia.us/CCC/](http://www.idph.state.ia.us/CCC/)

### **Iowa Diabetes Prevention and Control Program**

- The goal of the Iowa Diabetes Prevention and Control Program, funded by the Centers for Disease Control and Prevention, is to reduce the impact of diabetes on Iowans. The program has certified over 90 community-based outpatient education programs.

- Data from the 2010 Iowa Behavioral Risk Factor Surveillance System (BRFSS) survey indicate eight percent of adult Iowans had been told by a doctor they have diabetes, nearly 160,000 Iowans.
- Women had a slightly lower prevalence rate (seven percent) than men (eight percent) in 2010.
- Diabetes increases with age. In 2010, less than one percent of Iowans 18-24 years had diabetes while 16 percent of Iowans age 65+ had diabetes.
- Racial and ethnic minorities are at high risk of having diabetes compared to white adults. Non-Hispanic blacks, American Indian/Alaska Native and Hispanic adults and children are all more likely to have diabetes than non-Hispanic white adults of similar age. In Iowa, black women had more than double the risk of having diabetes, compared to Non-Hispanic white women. (13 vs. five percent age-adjusted rate) during the years 1999-2008.
- Diabetes is consistently among the leading causes of death in Iowa and the U.S. It was the seventh leading cause of death among Iowans in 2009, representing three percent of all resident deaths.
- Obesity, poor diet and sedentary lifestyle are type 2 diabetes risk factors.
- For more information, contact the program coordinator at **515-242-6204** or visit <http://www.idph.state.ia.us/hpcdp/diabetes.asp>.

### **Disability and Health Program**

- The IDPH Disability and Health Program is part of the Division of Behavioral Health, Office of Disability, Injury and Violence Prevention ([http://www.idph.state.ia.us/bh/injury\\_violence.asp](http://www.idph.state.ia.us/bh/injury_violence.asp)).
- “Disability” means a mental or physical impairment resulting in significant functional limitation in one or more areas of major life activity and the need for specialized care, treatment, or training services of extended duration. Disability may refer to limited memory, sight, hearing, talking or walking, or other limitations. A disability may limit activities of daily living, including personal grooming, attending school or work, or household chores.
- According to the 2008 Iowa BRFSS, 19.2 percent of women reported activity limitations and/or required use of special equipment, such as a cane or wheelchair.
- The program provides physical and program accessibility surveys and technical assistance to public and private agencies to increase access to services. The program also provides personal emergency preparedness planning trainings to Iowans with a disability, family members, service providers, and other requesting agencies. In 2009, a new *Community Access Project* was initiated, in partnership with the University of Iowa, which supports projects in four communities to equip trained advocates to carry out local individual emergency preparedness planning and Americans with Disabilities Act site visits.
- The program supports the University of Iowa, Center for Disabilities and Development’s “Living Well with a Disability” curriculum, offered through Independent Living Centers. The curriculum covers nutrition, exercise, depression, problem-solving, and advocacy. A “Continuing to Live Well with a Disability” curriculum has been developed. The curriculum covers nutrition, exercise, depression, problem-solving, and advocacy.
- For more information, contact the disability program consultant at **515-242-6336** or visit [http://www.idph.state.ia.us/bh/disability\\_health.asp](http://www.idph.state.ia.us/bh/disability_health.asp).

### **Heart Disease and Stroke Prevention Program (HDSP)**

- In 2009, of the 27,450 total deaths in Iowa, 8,538 (31 percent) were due to major cardiovascular disease. Of those, 6,912 deaths were attributed to heart disease and 1,626 to stroke.
- The HDSP program conducts activities such as partnership development, definition of the burden, implementation of a state plan to reduce the burden of heart disease and stroke, and pilot interventions that focus on detection and treatment of risk factors; early identification and treatment of heart attacks and strokes; and prevention of recurrent cardiovascular events.
- The HDSP program works with partners to define the scope of the problem and implement a state plan to reduce the burden of heart disease and stroke. The overall program, including the partners,

focuses on detection and treatment of risk factors; early identification and treatment of heart attacks and strokes; and prevention of recurrent cardiovascular events.

- For more information, contact the project coordinator at **515-281-6016** or [tmeek@idph.iowa.gov](mailto:tmeek@idph.iowa.gov) or go to [http://www.idph.state.ia.us/hpcdp/hdsp\\_home.asp](http://www.idph.state.ia.us/hpcdp/hdsp_home.asp)

### **Perinatal Hepatitis B Screening Program**

- The main goal of the Perinatal Hepatitis B Prevention Program is to eliminate perinatal transmission of hepatitis B (HBV) in the United States. The program provides case management of hepatitis B surface antigen (HBsAg) positive pregnant women as well as testing and vaccinating susceptible household contacts. Pregnant women should be tested for hepatitis B at an early prenatal visit for each pregnancy, even if they have been previously tested. Both the testing physician and the processing laboratory should report positive HBsAg tests to IDPH.
- As part of case management, the HBsAg positive pregnant woman will be followed through delivery to assure the child receives HBIG (hepatitis B immune globulin) and hepatitis B vaccine within 12 hours of birth. The infant should also receive subsequent HBV vaccinations at two and six months of age. Three to nine months following vaccination of the child, serologic testing should be performed to confirm protection from vaccine and rule out infection with HBV.
- Household contacts at risk should be tested for HBV status and begin HBV vaccine series. If the contact is HBsAg positive, referral for advance testing and follow-up is appropriate. If the contact is HBsAg negative, he or she should complete the HBV three-dose vaccination series and receive appropriate post-vaccination serologic testing. IDPH will provide HBV vaccine for susceptible household contacts with no other means of payment.
- For more information, contact the Perinatal Hepatitis B Coordinator at **1-800-831-6293**, ext. 7 or go to <http://www.idph.state.ia.us/ImmTB/Immunization.aspx?prog=Imm&pg=PerinatalHepB>.

## **HEALTHY BEHAVIORS/HEALTH PROMOTION**

### **Family Planning**

- Iowa has many clinics that offer high-quality, voluntary and confidential family planning (FP) services. Physicians and nurse practitioners trained in reproductive health care provide medical services. The cost of services is based on client income.
- The clinics are primarily funded through the federal Title X program, via the U.S. Department of Health and Human Services Office of Population Affairs. Clinics are also able to input enrollment information for the Iowa Family Planning Network Waiver (Iowa's Medicaid family planning waiver) for eligibility determination. This point of service enrollment reduces barriers to access for many women.
- FP services include health history and physical exams for males and females, Pap smears, birth control supplies, tests and treatment for sexually transmitted diseases, and pregnancy tests. FP clinics provide community education programs that respond to local community needs. Health education topics include reproductive health promotion; comprehensive birth control methods including abstinence; sexually transmitted disease and HIV/AIDS risk assessment and prevention; and reproductive life planning.
- Adolescents under 18 are encouraged to talk with their parents or guardians about their decision to seek family planning services. Adolescents and older clients are counseled to resist coercive sexual activity.
- For more information, contact the program manager at **515-281-4907** or go to [http://www.idph.state.ia.us/hpcdp/family\\_planning.asp](http://www.idph.state.ia.us/hpcdp/family_planning.asp).



### **Center for Congenital and Inherited Disorders (CCID)**

- The Center for Congenital and Inherited Disorders was established within the department in 1976 to initiate, conduct, and supervise genetic investigations and research to promote and protect the health of Iowans. Since its creation, the CCID, in partnership with the University of Iowa and state health care providers, has developed programs to provide Iowa with state-of-the-art genetics health care. CCID programs address all phases of the life cycle: prenatal, neonatal, pediatric and adult.
- The CCID administers seven programs: the Regional Genetic Consultation Service, the Iowa Neonatal Metabolic Screening Program, the Maternal Serum Alpha-Fetoprotein Screening Program, the Iowa Registry for Congenital and Inherited Disorders, the Neuromuscular and Related Genetic Disorders Program, the Stillbirth Surveillance Project and Prevention Programs, and the Family Health History Initiative.
- The Congenital and Inherited Disorders Advisory Committee advises the CCID programs. The committee is composed of representatives from each of the programs, various professional health care groups, consumers, two legislators and a representative from the Iowa Department of Public Health.
- For more information, contact CCID staff at **1-800-383-3826**, or visit <http://www.idph.state.ia.us/genetics/default.asp>.

### **Infertility Prevention Project (IPP)**

- The IPP is a collaborative effort sponsored by CDC and DHHS Office of Population Affairs. The IPP is housed within the STD Prevention Program. The STD Prevention Program, Family Planning Program, and Public Health Laboratory work together on this collaborative at the state, regional, and national levels. The program develops strategies to prevent and reduce infertility and other complications of *Chlamydia trachomatis* and *Neisseria gonorrhoeae*.
- Because chlamydia and gonorrhea infections are often asymptomatic until significant damage has been done to the reproductive tract, the best defense is to routinely screen for the infection in at-risk individuals.
- The IPP has established 70 chlamydia and gonorrhea screening sites statewide in locations such as family planning clinics, student health centers, tribal clinics, community health centers, prenatal clinics, and STD clinics to identify infected individuals. Women are targeted for screening because complications are more costly and often more invasive in women than in men. Partners of positive patients can also be tested and treated at the screening sites.
- The IPP offers free gonorrhea and chlamydia testing services to those most at risk for infection and utilizes other funding within the STD Prevention Program to provide free treatment and follow-up for gonorrhea and chlamydia patients identified through IPP screening. The follow-up includes risk reduction counseling for the patient and partner notification by disease prevention specialists.
- Direct and indirect costs of chlamydia infections alone are estimated at \$2.4 billion annually in the US. The CDC estimates that screening and treatment programs can be conducted at an annual cost of \$175 million. Every dollar spent on screening and treatment saves \$12 in the cost of complications resulting from undetected and untreated chlamydia.
- For more information, contact the STD Prevention Program Manager at 515-281-4936 or go to <http://www.idph.state.ia.us/HivStdHep/HIV-AIDS.aspx?prog=Hiv&pg=StdHome>.

### **Iowa Nutrition Network**

- The Iowa Nutrition Network is funded by USDA's Supplemental Nutrition Assistance Program (SNAP) to provide community-based nutrition education to individuals and families who qualify or are likely to qualify for food assistance. Women living in households with children and children themselves comprise the majority of persons receiving benefits; therefore, women are considered a priority audience for education services.
- The Network serves young families through Food Assistance Nutrition Education in Iowa communities. Much of that education is delivered through low income schools. In 2011-2012 over

28,000 children in 130 schools will participate in nutrition education. Families receive educational and motivational materials from *Pick a **better** snack & Act*, a campaign that promotes fruit and vegetable snacks and daily physical activity. A new low-fat milk campaign targeted to moms has been recently added to the Network's marketing mix. Efforts to reach parents through media and grocery store events will be tested as part of a rigorous research project in 2012.

- Two hundred at-risk women living in poverty will be offered nutrition education services through programs such as HOPES and Storks Nest. Services in this setting prioritize division of feeding responsibility, proper nutrition, and modeling healthy behaviors. A USDA resource, *Loving Your Family, Feeding Their Future*, provides the foundation for the nutrition education.
- Older women who participate in the Congregate Meal Program can participate in Chef Charles - an older adult nutrition education program offered to 3,000 older adults at 109 meal sites throughout Iowa.
- For more information, contact the program manager at **515-279-2415**.
- Program education resources can be found at: <http://www.idph.state.ia.us/pickabettersnack> and [http://www.idph.state.ia.us/nutritionnetwork/chef\\_charles.asp](http://www.idph.state.ia.us/nutritionnetwork/chef_charles.asp).

### **Iowans Fit For Life, Active and Eating Smart**

- IDPH is funded by CDC for building state capacity to address nutrition and physical activity to prevent obesity and other chronic diseases.
- *Iowans Fit for Life, Active and Eating Smart*, is a comprehensive state initiative to address nutrition and physical activity for Iowans of all ages. The plan covers current efforts, environmental conditions, barriers and resources. The plan includes strategies for educational settings, early childhood, older Iowans, agriculture and food systems, health care, worksite wellness, and the community.
- Project target areas impacting the health of women include: increasing the consumption of fruits and vegetables, improving the physical activity environment, decreasing consumption of high energy dense foods, decreasing consumption of sugar sweetened beverages, decreasing television viewing time, and increasing the prevalence and duration of breastfeeding.
- For more information and community resources, call **515-281-7501**, or visit <http://www.idph.state.ia.us/iowansfitforlife/default.asp>.

### **Maternal Health**

- IDPH supports and sponsors 21 programs that offer pregnancy health services statewide. The programs follow standards set by the American College of Obstetrics and Gynecology.
- Nurses, dental hygienists, registered dietitians, and social workers provide the following health care services at local agencies: prenatal risk assessment, care coordination, and health education for pregnant women and additional services for women at high risk; outreach efforts to find low income pregnant women who need help with access to prenatal care; preparation for labor, delivery, and infant care; breastfeeding education and support; transportation; post-delivery home visit, dental health assessment and counseling; dental referral; nutrition assessment and counseling; social assessment and referral; referral for child health, family planning, and WIC; and assistance with applying for Medicaid, as appropriate.
- For more information, contact the program manager at **515-281-4731** or go to [http://www.idph.state.ia.us/hpcdp/maternal\\_health\\_services.asp](http://www.idph.state.ia.us/hpcdp/maternal_health_services.asp).

### **Office of Minority and Multicultural Health**

- The mission of the IDPH Office of Minority and Multicultural Health is to reduce health disparities experienced by Iowa minorities, migrants, immigrants, and refugees and their families. It also strives to assure an appropriate and effective infrastructure exists to address health care needs and build public, professional, and policymaker support for all minority and multicultural health programs.

- To achieve these goals, the minority and multicultural health program collaborates with all the IDPH programs featured in this document.
- Education and outreach related to the disparate health needs of women, partnered with community-based networking, have been effective in developing new connections within the female minority, immigrant and refugee populations.
- For more information, contact the program manager at 515-281-4904 or visit [http://www.idph.state.ia.us/hpcdp/mh\\_default.asp](http://www.idph.state.ia.us/hpcdp/mh_default.asp).

### **Iowa Mammography Program**

- The Department of Public Health Mammography Program in the Bureau of Radiological Health is responsible for ensuring that mammography facilities meet the quality standards set by the national Mammography Quality Standards Act (MQSA). The MQSA requires all facilities in the United States to become accredited and certified prior to providing mammography services. The standards set by MQSA ensure that women all across the United States receive quality mammography services.
- Iowa is one of four states in the nation granted authority to accredit mammography facilities within the state and also one of four states to certify facilities. Iowa is one of two states that both accredits and certifies.
- Iowa currently certifies 140 mammography facilities and accredits 130. Iowa has 125 facilities providing digital mammography services.
- The mammography program also authorizes facilities to provide stereotactic breast biopsy services within the State of Iowa. Stereotactic Breast Biopsy is a minimally invasive needle biopsy method to sample an area detected on a mammogram to determine whether it is cancerous or benign (non-cancerous).
- Science has shown that the best means of managing breast cancer is to detect it early so it can be treated, thus extending a person's life. Mammography is the best noninvasive tool for the early detection of breast cancer.
- For more information, call **515-281-0405** or go to <http://www.idph.state.ia.us/eh/mammography.asp>

### **Occupational Safety and Health Surveillance Program**

- The Occupational Health and Safety Surveillance Program (IDPH OHSSP) is part of the IDPH Environmental Health Division ([www.idph.state.ia.us/eh/default.asp](http://www.idph.state.ia.us/eh/default.asp)).
- OHSSP collects data about work-related accidents, illnesses, injuries, and fatalities across the state to report the facts, provide information, and help develop solutions that will work in Iowa.
- Nineteen occupational indicators of safety and health are tracked each year. Key surveillance areas include work-related fatalities in partnership with the Iowa Fatality Assessment and Control Evaluation program, (IA FACE, [www.public-health.uiowa.edu/face/](http://www.public-health.uiowa.edu/face/)); work-related pesticide exposures in partnership with the Iowa Statewide Poison Control Center (ISPCC) and Iowa Department of Agriculture and Land Stewardship (IDALS); and, adult blood lead exposure surveillance (ABLES).
- Additionally, the program works with the IDPH Center for Acute Disease Epidemiology (CADE) and the IDPH Environmental Health Services Bureau to address disease outbreaks or events that are work related.
- For more information, call **515-281-4930 or 800-972-2026** or go to [http://www.idph.state.ia.us/eh/lead\\_poisoning\\_prevention.asp#occupational](http://www.idph.state.ia.us/eh/lead_poisoning_prevention.asp#occupational)

### **Oral Health**

- The IDPH Oral Health Center promotes health behaviors to reduce the risk of oral diseases and assure optimal oral health for all Iowans.



- The I-Smile™ Dental Home Initiative can assist children and pregnant women with preventive care and education, care coordination, and referral and treatment for oral disease. I-Smile™ and other oral health programs have been implemented in schools, maternal and child health agencies, public dental health clinics, and other community settings. Visit <http://www.ismiledentalhome.org> for further information on the I-Smile™ Dental Home Initiative.
- For more information on women's oral health, contact the Oral Health Center at 1-(866)-528-4020 or visit [http://www.idph.state.ia.us/hpcdp/oral\\_health.asp](http://www.idph.state.ia.us/hpcdp/oral_health.asp).

### **Sexually Transmitted Disease (STD) Prevention Program**

- STDs are among the most common infectious diseases in the United States. The program has established 70 Infertility Prevention Program sites that offer chlamydia and gonorrhea screening and treatment in family planning clinics, adolescent health centers, community health centers, school-based health centers, juvenile detention facilities, and jails. The program also collaborates with numerous county health departments to offer STD clinic services.
- Women bear the greatest burden of STDs, suffering more frequent and more serious complications than men. Complications can include hospitalization, surgery, infertility, tubal pregnancy, birth defects, and even death. By Iowa law, syphilis, gonorrhea, chlamydia, and HIV are reportable to IDPH.
- Along with Iowa Infertility Prevention Program services, the STD Prevention Program collaborates with local STD clinics and private sector providers to ensure appropriate syphilis testing, treatment, and follow-up care. Follow-up for gonorrhea, chlamydia, and syphilis includes risk reduction counseling and partner identification and notification by Disease Prevention Specialists. In cases of syphilis in women, testing, treatment, and follow-up care directly correlate to prevention of congenital syphilis (the passing of syphilis to an unborn child which can be life threatening to the baby).
- Physicians who order the testing and laboratories that process the specimens are both mandated to report positive cases and other demographics to the STD Prevention Program. This information is protected by law and can be released only to county and state staff members working to intervene in the spread of the infection.
- In all 50 states, a minor has the capacity to give consent for STD testing and treatment.
- For more information, contact the program manager at 515-281-4936 or visit <http://www.idph.state.ia.us/HivStdHep/HIV-AIDS.aspx?prog=Hiv&pg=StdHome>.

### **Violence Against Women Prevention**

- The IDPH Violence Against Women (VAW) program is housed in the Office of Disability, Injury and Violence Prevention ([http://www.idph.state.ia.us/bh/injury\\_violence.asp](http://www.idph.state.ia.us/bh/injury_violence.asp)).
- Violence against women includes domestic violence and sexual assault. This type of violence has direct and indirect consequences on women's health, affecting pregnancy outcomes, risk of serious injury or death, and rates of depression. The VAW program at IDPH develops policy and protocols for health care providers, conducts professional training, and provides other resources to communities to improve the health care response to violence against women ([http://www.idph.state.ia.us/bh/violence\\_against\\_women.asp](http://www.idph.state.ia.us/bh/violence_against_women.asp)).
- The sexual violence prevention program receives state and federal funds to support community programs that offer comprehensive prevention programming to youth in K-12 and college settings ([http://www.idph.state.ia.us/bh/sv\\_prevention.asp](http://www.idph.state.ia.us/bh/sv_prevention.asp)).
- Program staff provide administrative support for the Iowa Domestic Abuse Death Review Team, which reviews and makes recommendations for preventing domestic abuse deaths in Iowa ([http://www.idph.state.ia.us/bh/domestic\\_abuse\\_review.asp](http://www.idph.state.ia.us/bh/domestic_abuse_review.asp)).
- For more information contact the program manager at 515-281-5032 or go to [http://www.idph.state.ia.us/bh/injury\\_violence.asp](http://www.idph.state.ia.us/bh/injury_violence.asp).

**WIC Program (Special Supplemental Nutrition Program for Women, Infants and Children)**

- The IDPH WIC Program recognizes the implications of proper maternal and early childhood nutrition. Nutrition education, nutritious foods, and health care referral provide not just immediate food benefits, but education to influence eating habits for a lifetime.
- WIC actively promotes and supports breastfeeding, through the local agencies and community-based coalitions. Breastfeeding initiation rates for all Iowa WIC mothers have steadily increased since 1990, as have breastfeeding initiation rates for all Iowa mothers.
- For more information, call **800-532-1579** or visit <http://www.idph.state.ia.us/wic/>

**Women's Health Information Center Web Site**

- A diverse resource for women's health information is at <http://www.womenshealthiowa.info>. This site provides a wide range of topics including healthy living over age 50, reproductive health, depression, child and adolescent health, A to Z topics, and live help.
- The information provided is not intended for self-diagnosing or treating a health problem or as a substitute for consulting a licensed health care professional. The Iowa Department of Public Health urges you to consult a licensed health care professional to discuss your health.

**Funding**

With the exceptions of the gambling treatment fund and the tobacco settlement allocation, most of the funding for IDPH women's health programs comes from federal sources, primarily the Department of Health and Human Services via the Maternal Child Health Bureau and Office of Population Affairs, the Centers for Disease Control and Prevention, and United States Department of Agriculture.

**Questions**

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